

CLAIMS ONLY	Application Number	Filing Date
	10/501847	
	Applicant(s)	

10/50/847

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CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
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12		/				
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44						
45						
46						
47						
48						
49						
50						
Total Indep	1					
Total Depend	17					
Total Claims	18					

May be used for additional claims or amendments						
	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total Indep						
Total Depend						
Total Claims						